ISSUE SLIP STAPLE AREA (for additional cross references)

| POSITION | INITIALS | ID NO. | DATE |
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| | | | |
| FEE DETERMINATION | E. H. | | 04-19-01 |
| O.I.P.E. CLASSIFIER | | 32 | 5/10 |
| FORMALITY REVIEW | | 1019 | 06.12. 01 |
| RESPONSE FORMALITY REVIEW | | | |

## INDEX OF CLAIMS

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| ✔ ............................. Rejected | | N ............................. Non-elected |
| = ............................. Allowed | | I ............................. Interference |
| − (Through numeral)... Canceled | | A ............................. Appeal |
| ÷ ............................. Restricted | | O ............................. Objected |

| Claim Final | Original | Date | | | | | | | | | |
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| | 20 | ✔ | ✔ | | | | | | | | |
| | 21 | ✔ | ✔ | | | | | | | | |
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If more than 150 claims or 10 actions
staple additional sheet here

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